



August 13, 2014  
Announcement 786

## **Provider Type 63 (Residential Treatment Center) Enrollment Checklist Requirements**

The Provider Enrollment Checklist for provider type (PT) 63 (Residential Treatment Center – RTC) has been updated. When PT 63 providers enroll or re-enroll, the updated checklist must be completed and submitted along with their Provider Enrollment/Re-Enrollment Packet. The updates align with the policy requirements for Medicaid Services Manual (MSM) Chapter 400, Section 403.8B.

Required documentation includes answers to questions regarding the services the facility provides and the specialties and genders the facility serves. This information will be beneficial for the Division of Health Care Financing and Policy (DHCFP) to understand the nature and capacity of the RTC facility. The form also requires providers to initial sections to acknowledge they have reviewed policy requirements.

For information regarding the policy requirements, please contact Hilary Jones, R.N., HCC III at (775) 684-3753.

[Provider Enrollment Checklists](#) are available on the Provider Enrollment webpage at [www.medicaid.nv.gov](http://www.medicaid.nv.gov).